

07-57

David K. Ginsberg, M.D.
154 Hunters Run
Newtown Square, PA. 19073

RECEIVED & INSPECTED

APR 30 2007

FCC-MAILROOM

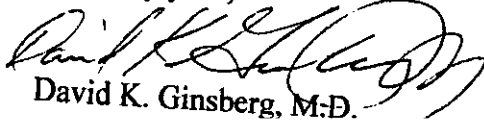
21 April 2007

Kevin J. Martin, Chairman
Federal Communications Commission
Consumer & Governmental Affairs Bureau
445 12th. Street, SW
Washington, DC. 20554

Dear Sir:

I am writing to register my feelings regarding the prospective merger of the two satellite radio stations. I am a subscriber to SM satellite radio and I **DO NOT** want the merger to be concluded. This would bring on a monopoly which would only increase the already excessive number of stations far beyond what anyone could utilize. More importantly it would give the owners greater control of content and information delivered to the public. Also without competition there would be little incentive to improve or invent better programming. Further the ownership would have the ability to charge what they wish without fear of any competition. Any time the public has only one choice the end results are not in the Public's best interest but favor big business and corporate owners.

Sincerely your,


David K. Ginsberg, M.D.


No. of Copies rec'd 0
List ABCDE

FOR DAVID K. GINSBERG

Complaint Type:

Account Type:

☐ Congressional Complaint

IC Number: 07-10276077
 Date Received: 04/30/2007 
 Date Entered: 05/08/2007
 Entered By: PORTALSV1
 Assigned To: Blaise Humes/FCCIN

Case Type:
Complainant: David K. Ginsberg
 Date Assigned: 05/08/2007
 Date Reassigned:
 Service Date:

Date Closed:
 Closed By:
 Close Letter Needed? ☒ Yes ☐ No

Response Date:
Original Analyst:
 Purged By: Purged Date:
 Removed By: Removed Date:

Supervisor Check: ☐ Yes ☒ No

Indecency Referral Code:

Current Status: Pending Analyst Review

[View Complaint](#)

Associated Case:

Complaint Summary

Apparent Carrier(s):

☐ **Yes<<< Check here if you wish to serve both a Wireline and Wireless carrier.**

Problem Number:

Title: None	First Name: David K.	Middle Initial:	Last Name: Ginsberg
Contact Number: Ext.	Consumer's Telephone Number: Ext.		
Fax Number:	TTY Number:		
Email Address:	Internet Address:		
PO Box:	Address: 154 Hunters Run		
City: Newtown Square	State: PA Zip: 19073		

On Behalf Of:	
Company Name:	
Party's Name:	Relationship with the Party:
Party's Contact Number: Ext.	PO Box:
	Address:
	City: State: Zip:
Other Party that can be contacted?	
Name:	Relationship:
Contact Number: Ext.	Address:
	City: State: Zip:
** Amount of credit FCC effort generated:	
Duplicate Credit Checked: <input type="radio"/> Yes <input checked="" type="radio"/> No	

Have you paid any of the disputed charges?

Did the company billing for these charges adjust or refund some or all of the disputed charges?

if yes, what was the amount of the adjustment or refund?

b. Telephone number for the carrier(s) or company(ies) involved

with your complaint, including area code:

Phone: Ext:

c. Which type of service is involved with your complaint:

TCPA Information from 475

- 1 the telephone number of the individual or company who called or faxed you: Ext:
- 2 your telephone number(s) on which the call or fax was received: Ext:
- 3 a description of the telemarketing call, pre-recorded message, or unsolicited fax, including an identification of the company whose products or services were being advertised. and any phone numbers that were included in the call or fax:
4. the "opt-out" number(s) provided in the call(s) or on the fax(es):
(List number(s) given in the call(s) or fax(es) for you to contact if you do not want to receive any additional calls or faxes.) Ext:
5. Have you: (a) purchased anything from the company being advertised in the call or fax:
(b) made an inquiry or application to that company: or (c) given consent to the company to send you the call or fax? If so. please describe and state when you had such contact with the company.
- (1) Date of Program:
(2) Time of Program:
(3) Network:
(4) Call Sign. Channel OR Frequency of the station on which you viewed/heard the material:
(5) City and State Where Program Was Viewed:
(6) Name of Program or DJ/Personality/Song/Film:
- Updated? ☐ Yes ☒ NO

ANALYSIS SECTION

Correspondence Type: ☒ Complaint ☐ Inquiry Source Code:

Apparent Carrier(s):

Re-Serve Carrier(s):



Responding Carrier(s):

Assigned Subject Code:

Activity Code: Direct

Assigned Code Acronym:

Final Responsible Party:

Sub-Category:



Additional Sub-Category:



Copy of Response Sent to Consumer by Carrier?: ☐ Yes ☐ NO

Mediation with Carrier/Complainant?: ☐ Yes ☐ No

Response Type:

Referral Information

Date Referred:

[Consumer Referral Letter](#) [Agency Refe](#)

[Indecent - R](#)

Referred To:

Agency Name(s):

Company Name(s):



[General Acknowledgement](#)

[Create TC](#)

[Indecent Dismissal](#)

[TFAX E](#)

[DNC - More Information](#)

[TFAX](#)

[DNC - Enforcement](#)

[TFAX More i](#)

[DNC - Exemption](#)

[Non DNC - More Information](#)

Actionable Case:

☐ Actionable

☒ NonActionable

DNC Enforcement Letter Generated?

☐ Yes

☒ No

☐ Yes

☒ No

TFX Enforcement Letter Generated?

DNC More Info Letter Generated?

☐ Yes

☒ No

☐ Yes

☒ No

TFX Exemption Letter Generated?

DNC Exemption Letter Generated?

☐ Yes

☒ No

☐ Yes

☒ No

TFX More Info Letter Generated?

Non DNC More Info Letter Generated?

☐ Yes

☒ No

Deferment Information

Date Deferred:

Reason:

None

Date UnDeferred:

Extension Information:

Extension Requested:

☐ Yes

☒ No

Extension Granted:

☐ Yes

☒ No

SERVE INFORMATION

COMMENTS

Comment History:

DOCUMENT HISTORY

Crested by	OSCARServer	Date	05/08/2007 03:41 PM
Last Edited by		Date	